

INTERIM REPORT on the HEALTH & SANITARY CIRCUMSTANCES

of the URBAN DISTRICT OF WELLINGTON for the Year 1940.

By the beginning of the year the Town had become accustomed to war conditions and restraints and viewed from some angles it might be said that little departure had been made from normal peace-time life. The rationing of food-stuffs encroached more and more on the purchasing powers and fully manifested itself. Market prices for home-grown produce showed some increase, and with some diminution in variety, where supplies have been plentiful there has been no lack of demand. The enforced pedestrianism caused by the curtailment of vehicular traffic did not appear to materially lessen movement in the town, and it may be that the changed form of locomotion will be of marked benefit to the health of the people. Many new regulations have been made to meet the times and considerable attention has had to be given to this aspect of Health Administration. Evacuation (although not carried out under official schemes for organised parties) preventive measures to control spread of disease and war damage measures have necessitated many conferences. Normal Public Health Procedure has, as far as possible, been maintained but there has been little opportunity for advancement. Priority has been given to the more urgent measures as they have arisen. This additional work has necessitated your Sanitary Inspector shouldering a greater burden and at times he has been hard pressed but with the additional assistance granted for the control of your billeting scheme he should have some relief.

POPULATION. Housing accommodation has been taxed almost to its capacity and it is difficult to estimate if the existing method of inflow has made the control of accommodation easier than it would have been if the Town had remained a reception area. The population of the district has increased, nearly 33 $\frac{1}{2}$ %, due to the presence in the district of large numbers of self evacuees, civil servants attached to ordnance factories, and persons engaged on war work. In March most of the school children evacuated under official schemes in Sept. 1939 returned to Smethwick, but a further 800 children were allocated to this district under a new government evacuation scheme. Considerable time and thought was expended in making the necessary preparations to receive and deal with these, and in the scheduling of suitable billets. A large house was requisitioned for use as a hostel to deal with difficult cases, and for use during the illness or absence from home of foster parents. In July the War Dept. were given certain parts of the town for the billeting of a limited number of civil servants, and these were to be an addition to the commitments under the second scheme for the evacuation of school children. The civil servants arrived in September and as their numbers greatly increased the town was relieved from the receiving of school parties. However, co-inciding with the arrival of the civil servants numbers of women with children from bombed areas and persons from coastal districts arrived in the town and the difficulty of finding suitable billets became acute. The distribution of evacuees resulted in the smaller type of cottage property, Council houses and small villas becoming crowded while some of the larger type of house still has accommodation.

Population (continued)


The difficulties of the question of billets was not however confined entirely to accommodation. To be successful persons must be billeted with persons near to their own mode of life if the arrangements are to continue successfully for any length of time. The child transferred under the official scheme allowed for considerable medical supervision and this was, of necessity, absent when the movement was made under less regulated means. The uncontrolled movement has allowed a degree of contagious disease to become apparent. Particular attention must be drawn to the presence of "itch" (scabies). Not many cases were reported prior to this year but recently notice of such infections have been frequent. It is not to be thought that the evidence of this contagion is confined to Wellington or to the County. Reports from various parts of the Country show that it is widespread and numerous causes of spread have been suggested. While it may seem difficult to prevent its onset there is no reason why its spread should not be prevented by vigorous attack on the established cases. Much acute misery would then be saved to the sufferers.

EMERGENCY HEALTH LABORATORY. This has been in full operation at Wrekin College and has been much used by the Public Health Department and local Medical Practitioners. Results for minor bacteriological examinations have been obtained expeditiously and co-operation in investigating outbreaks of infectious disease with Dr. Jones of the department has been of much benefit, its use being marked in an outbreak of dysentery which occurred locally.

WATER SUPPLIES. No material change has been made in the scheme for the Town. The supplies are subjected to regular examination by the Analyst and the results obtained have been satisfactory. The important order of the Ministry of Health requiring the chlorination of supplies for populations over one thousand persons has necessitated appropriate plant being installed at two separate points to serve the main supplies. With this in action it will be necessary to maintain a steady average of purification according to the Ministry's recommendation. While this new safeguard will stabilise the purity of the whole water-undertaking it must in no way supercede the precautionary measures already in use. This is particularly so in the case of such waters as are gathered from the side of the Wrekin. For this service a system of sand filtration has been in use and will be maintained. Measures are in hand to meet any emergency positions as they may arise and the localisation of habitation should allow for speedy notice being given to consumers.

PUBLIC BATHS. The baths, and in particular the slipper baths, have continued to be used extensively by troops stationed in the district and neighbouring district. The water from the Council's swimming bath and from a privately owned public swimming bath was subjected to analysis and found to require additional chlorination. Further sampling showing an improvement.

SEWAGE SYSTEM. Despite the increased pressure being made on the system the sewers and disposal plant have proved adequate to the demands. No extensions have been made.



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HOUSING. The erection of new houses has been generally at a standstill, but 50 new houses are being erected in the district by the Air Ministry. Housing inspections have been carried out and repairs effected where required. The presence of moveable dwellings in the district is being watched closely. The question of the use of suitable condemned houses, which have not yet been demolished, for use of families homeless due to war operations has been considered and it was decided not to take any action in the matter for the moment. In this connection a visit was made to the district by an Inspector of the Ministry of Health and certain premises were examined.

THE SUPERVISION OF FOOD & MEAT SUPPLIES.

The considerable curtailment of the supply of meat has necessitated adaptation of other foods to supplement and maintain the calorific standard. There should be no shortage of potatoes and the regulated use of fresh vegetables will provide against any possible deficiency in vitamins which were accustomed to be looked for in the fresh fruits which were imported and have now ceased to be available. There may be some considerable hardship to the child community in the enforced restriction in the intake of preserves and jams. So far there has been no adaptation of any system of community feeding although meals are provided at mid-day in two schools in the area at a small cost. To cater for soldiers visiting the town three canteens are available. Premises used for the preparation and sale of foodstuffs were regularly inspected and certain amounts of tinned and other foods were dealt with. Bulk supplies are now replacing certain tinned articles and this raises the possibility of contamination which will entail closer supervision. In January the Government Scheme of control of slaughter-houses came into force and the use of all slaughter-houses in the district was discontinued with the exception of the two bacon factories and the casualty slaughter-house. The carcasses of all animals slaughtered at these establishments were carefully examined by the Sanitary Inspector.

INFECTIOUS DISEASES. With the constant movement of evacuees and persons seeking lodgings in the Area great opportunity has been given for the harbouring and spread of infectious disease. Direct infection induced by the inability to provide suitable means of segregation for the milder ailments which would normally be kept at home appears to be more prevalent and the high incidence of measles in the first half of the year may, in some degree, be ascribed to this. Over three hundred cases were notified, the majority in the first four months; the peak being reached, for monthly figures, in March. The last six months were comparatively free, no cases being notified in July, September and November. No comparative figures have been available for measles or for its frequently companionate illness whooping cough. The latter disease gave rise to some notifications but in very limited numbers. These did not have any association with the measles outbreak; as the frequency of this disease diminished it was to some degree re-placed by whooping cough which, however, was never in extensive proportions. Scarlet fever gave rise to four times the number of cases of the previous year but these were spread evenly over the period and at no time was there any approach to epidemic condition. The type of illness was generally mild. Diphtheria, on the other hand, had a reduction which, after the first month of the year, left the district completely free from this virulent disease. There is no doubt but that in an urban area of

Infectious Diseases (continued).

this nature the full benefit of protective treatment can be appreciated. No difficulty should be experienced in organising procedure and a very high percentage of acceptances must be the aim and this standard should be maintained.

Pneumonia showed a very slight increase in numbers.

Dysentery. From time to time in previous years cases of dysentery have been brought to notice but these have occurred sporadically and have usually been discovered after the patient has been well on the road to recovery. During the year, however, a considerable outbreak occurred at the Wrekin College where some sixty cases were notified and from investigation it would appear that a considerable number more were missed. The outbreak was limited to the College, was mild in type and the patients were able to resume their normal lives in a very short space of time. Dr. Prentice, Medical Officer to the College, Dr. Jones, of the Emergency Health Laboratory, and your Sanitary Inspector, Mr. Speake, co-operated in investigating the outbreak. Special attention was paid to the health of the teaching and kitchen staffs. Food was examined and recommendations were made for the better storage of certain foodstuffs, particularly milk. A proper scheme of refrigeration is essential for a large institution of this nature and, excepting for the present times, should be installed. The school dairy, where milk is kept for certain short periods, was visited and recommendations were made with the aim of securing complete separation from other food offices; particularly where odorous foodstuffs are concerned. On an additional "follow-up" investigation of the milk supply certain difficulties were experienced and a completely satisfactory examination of the source was not able to be made. However, as the disease is, in all probability, more prevalent than would appear from the notification returns the investigation of the milk supply at source was not of paramount importance. The Sonne type of dysentery, the bacillus of which was the causative agent in the foregoing, gives rise to a mild illness, is probably very widespread and, from recent observations, is likely to recur in the district. To secure a high degree of protection in view of the difficulty in discovering the indisputable source of infection in the present epidemic, efforts are being made in the College to raise the general standard of hygiene, particularly in the kitchens, and cleanliness and care in the preparation of uncooked foodstuffs has been stressed. The question of the dissemination of the disease from the Town has been raised but no cases have been brought to notice officially, although the onset of diarrhoeal sickness with slight feverishness, passing off in a few days may give rise to little concern and be easily missed. Nevertheless, the Town may be able by securing increased and improved sanitary conveniences in the more frequented parts, situated in easily accessible positions to do much to alleviate what is a source of continued complaint. Tuberculous cases, amongst incomers to the Town, have been noted from time to time and strict supervision has been required to safeguard persons receiving these in lodgings or giving other accommodation. the emergency conditions has made such supervision extremely difficult and on such cases coming to notice special attention has been given to such premises.

Typhoid. No cases of this disease occurred and it was not considered necessary to offer general prophylactic treatment but facilities are available locally and this service can be instituted at short notice.

Cerebro-spinal fever. No cases have been notified.

13. 6. 41.

(Signed) W.A.M. Stewart.

Medical Officer of Health.

